

Provider Type 18**Provider Documentation Requirements****Pharmacy/ DME Suppliers**

| Specialty | Sub-Specialty | Enroll Type | Certification | License | Rate Letter | Rider A | Other Agency | Comments |
|---------------------------|------------------------------------|-------------|---------------|--------------|-------------|---------|--------------|-------------------------------|
| 010 Pharmacy | | FAO | NABP | Agency | | | | |
| | 413 DME/Supplies Services | | | | | | | |
| | 414 Prosthetics/Orthotics Services | | | | | | | |
| | 423 Hearing Aid Dealer Services | | | | | | | |
| | 469 Specialty Drugs | | | | | | | |
| | 470 Mail Order/Direct Supply Drug | | | | | | | |
| | 471 Mail Order/Other | | | | | | | |
| | 475 Maine Rx Plus | | | | | | | |
| | 477 Low Cost Drugs | | | | | | | |
| | 413 DME/Supplies Services | | | | | | | |
| | 414 Prosthetics/Orthotics Services | | | | | | | |
| 016 DME/Supplies | | FAO | | No | | | | Must have storefront in Maine |
| | 423 Hearing Aid Dealer Services | | | | | | | |
| 017 Prosthetics/Orthotics | | FAO | | Professional | | | | |